Amendments to the Claims:

The following Listing of Claims will replace all prior versions, and listings, of claims in the application:

Listing of Claims

1. (Currently Amended) A method of delivering an immune response modifier (IRM) compound to a mucosal surface so as to achieve immunomodulation with reduced irritation of the mucosal surface from the IRM compound, comprising:

interrupted delivery of an IRM compound other than imiquimod by intermittently applying in repeated applications the IRM to the mucosal surface and, after each application, removing from the mucosal surface at least 50% by weight of the IRM that was originally applied in each application at a time before it would otherwise be naturally absorbed or eliminated, wherein the IRM activates a toll-like receptor (TLR) selected from the group consisting of TLR6, TLR7, and TLR8, and combinations thereof, and the IRM compound is selected from the group consisting of imidazoquinoline amines, tetrahydroimidazoquinoline amines, imidazopyridine amines, 6,7-fused cycloalkylimidazopyridine amines, 1,2-bridged imidazoquinoline amines, imidazonaphthyridine amines, imidazotetrahydronaphthyridine amines, oxazoloquinoline amines, thiazoloquinoline amines, oxazolopyridine amines, thiazolopyridine amines, oxazolonaphthyridine amines, thiazolonaphthyridine amines, 1*H*-imidazo dimers fused to pyridine amines, quinoline amines, tetrahydroquinoline amines, naphthyridine amines, or tetrahydronaphthyridine amines, pharmaceutically acceptable salts thereof, and combinations thereof..

2. (Previously Presented) The method of claim 1 wherein the IRM is applied with a device and removed with the same device.

3. (Original) The method of claims 1 or 2 wherein the mucosal surface is associated with a condition selected from the group consisting of a cervical dysplasia, a papilloma virus infection of the cervix, a low-grade squamous intraepithelial lesion, a high-grade squamous intraepithelial

lesion, atypical squamous cells of undetermined significance, a cervical intraepithelial neoplasia, an atopic allergic response, allergic rhinitis, a neoplastic lesion, and a premalignant lesion.

4. (Original) The method of claim 3 wherein the mucosal surface is on the cervix and the associated condition is selected from the group consisting of cervical dysplasia, high-grade squamous intraepithelial lesions, low-grade squamous intraepithelial lesions, and atypical squamous cells of undetermined significance with the presence of high risk HPV.

5. (Original) The method of claim 4 wherein the mucosal surface is on the cervix and the associated condition is atypical squamous cells of undetermined significance with the presence of high risk HPV.

6. (Withdrawn) The method of claim 3 wherein the mucosal surface is on the cervix and the associated condition is a papilloma virus infection of the cervix.

7. (Previously Presented) The method of any one of claims 1, 2, 4 through 6 wherein the IRM is applied to the mucosal surface using a device selected from the group consisting of a tampon, a cervical cap, a diaphragm, a cotton swab, a cotton sponge, a foam sponge, and a suppository.

8. (Previously Presented) The method of claim 1, wherein the at least 50% by weight of the IRM is removed less than 8 hours after it is applied.

9.- 10. (Cancelled)

11. (Previously Presented) The method of claim 1 wherein the at least 50% by weight of the IRM is removed 2 hours or less after it is applied.

12.- 19. (Cancelled)

20. (Previously Presented) The method of claim 17 wherein the IRM is an imidazonaphthyridine amine or a pharmaceutically acceptable salt thereof.

21. (Original) The method of claim 20 wherein the IRM is 1-(2-methylpropyl)-1H-imidazo[4,5-c][1,5]naphthyridin-4-amine or a pharmaceutically acceptable salt thereof.

22. (Previously Presented) The method of claim 1 wherein the IRM comprises a 2-aminopyridine fused to a five membered nitrogen-containing heterocyclic ring.

23.- 26. (Cancelled)

27. (Previously Presented) A method of treating a condition associated with a mucosal surface with an immune response modifier (IRM) compound and reducing irritation of the mucosal surface caused by the IRM, comprising:

interrupted delivery of an IRM other than imiquimod by intermittently applying in repeated applications the IRM to the affected mucosal surface for a time sufficient to achieve therapeutic immunomodulation and, after each application, removing from the mucosal surface at least 50% of the IRM that was originally applied in each application at a time before it would otherwise be naturally absorbed or eliminated.

28.- 33. (Cancelled)

34. (Previously Presented) The method of claim 27 wherein the IRM is predispersed within a solid matrix capable of releasing the IRM while in contact with the mucosal surface.

35. (Cancelled)

36. (Previously Presented) The method of claim 34 wherein the solid matrix is selected from the group consisting of a tampon, a sponge, and a suppository.

37.- 40. (Cancelled)